

**TOWN OF AMHERST -- PLANNING BOARD
SITE PLAN REVIEW APPLICATION**

	For Office Use Only
Applicant(s) _____	Application # _____
Address _____	Filing Date _____
_____	Public Hearing Date _____
_____	Decision/Date _____
Telephone Number _____	

Owner (if other than applicant) _____	Attorney/Engineer/Architect _____
Address _____	Address _____
Telephone _____	Telephone _____

Name and description of project _____

Amendment to previously granted permit ____ yes ____ no

Property address _____

Assessor Map/Parcel#(s) _____ Property Deed Book/Page #(s) _____

Zoning District(s) _____

Lot size _____ sq. ft. _____ acres

Existing land use and classification number (Zoning Bylaw section 3.3):

Proposed land use and classification number:

Minimum Setback	Front	Required _____	Proposed _____
	Rear	Required _____	Proposed _____
	Side 1	Required _____	Proposed _____
	Side 2	Required _____	Proposed _____
Maximum Lot Coverage		Permitted _____ %	Proposed _____ %
Maximum Building Coverage		Permitted _____ %	Proposed _____ %
Maximum Building Height		Permitted _____	Proposed _____

SITE PLAN REVIEW APPLICATION

Number of existing buildings on site: _____ Total floor area of each: _____

Number of proposed buildings: _____ Total floor area of each: _____

Parking Spaces Required _____ Proposed _____

If residential use is proposed, number of dwelling units _____

Request for Waiver(s)

Waiver(s) are requested from Article II, Section 3B of the Planning Board Rules and Regulations. List section numbers to be waived and **indicate reason(s) for request.**

Signature of applicant(s)

Signature of property owner(s)

PLEASE NOTE: *The Town of Amherst - Planning Board Rules and Regulations (attached), Zoning Bylaw Section 11.2 Site Plan Review, and Landscaping Guidelines (available at the Planning Department office) should be used for reference in completing applications.*

Site Plan Review Fee Calculation:

A. Standard Calculation

Calculate and add the following:

\$100/5,000 sq. ft of new/alterd lot coverage (the total square footage of all new/alterd building footprints, plus all paved surfaces):

_____ sq. ft. ÷ 5,000 sq. ft. x \$100 = _____
area of new/alterd coverage 'coverage' portion of fee

plus

\$200/5,000 sq. ft. of new/alterd GFA (gross floor area—the total square footage of all new floor area on all levels of all new buildings):

_____ sq. ft. ÷ 5,000 sq. ft. x \$200 = _____
area of new/alterd GFA 'GFA' portion of fee

Coverage fee		\$ _____
GFA fee	+	\$ _____
Total SPR fee		\$ _____

B. Alternative Calculation

Where an SPR is required for minor site or building changes (signs, lighting, painting, etc.), and no new/alterd site coverage or building square footage are proposed, then the SPR fee shall be calculated as follows:

Review of site conditions & plan	\$100
Review of building conditions	+ 200
Total SPR fee	\$300

TOWN HALL OFFICE USE ONLY

Received by the Town Clerk on _____
date

Fee paid \$ _____

Town Clerk

Received by the Planning Department _____
